



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

July 27, 2007

GENERAL LETTER NO. 11-F-AP-2

ISSUED BY: Bureau of Collections, Division of Child Support, Case Management and Refugee Services

SUBJECT: Employees' Manual, Title 11, Chapter F, ***INCOME WITHHOLDING APPENDIX***, the following form:

470 3272 *Order/Notice to Withhold Income for Child Support*, revised

Summary

This chapter is revised to update all versions of form 470 3272, *Order/Notice to Withhold Income for Child Support*. Language has been added under "Additional Information" stating how to withhold for lump sum income.

Effective Date

Immediately.

Material Superseded

Remove form 470 3272, dated 9/06, from the Employees' Manual, Title 11, Chapter F, Appendix, and destroy it.

Additional Information

Refer questions about this general letter to your regional collections administrator.

Iowa Department of Human Services
X ORDER/NOTICE TO WITHHOLD INCOME FOR CHILD SUPPORT
_ NOTICE OF AN ORDER TO WITHHOLD INCOME FOR CHILD SUPPORT

X State/Tribe/Territory: Iowa
City/Co./Dist./Reservation:
_ Non-governmental entity or Individual
Case Number:_____

Original:

Amended

Termination...:

Date:

) RE: Employee/Obligor's Name (F,MI,L):

) _____

) Employee/Obligor's SSN:

) _____

) Employee/Obligor's Case Identifier:

) _____

) Obligee's Name (F,MI,L):

) _____

Employer/Withholder's Federal EIN:

ORDER INFORMATION: This document is based on the support or withholding order from _____. You are required by law to deduct these amounts from the employee's/obligor's income until further notice.

	per	current child support
	per	past-due child support
*	per	current cash medical support
*	per	past-due cash medical support
*	per	spousal support
*	per	past-due spousal support
	per	other (specify)

for a total of ____ per ____ to be forwarded to the payee
below: Collection Services Center, PO Box 9125, Des Moines, IA 50306-9125,
or pay online at iowachildsupport.gov. (Include the case identifier).
You do not have to vary your pay cycle to be in compliance with the support order. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

per weekly pay period.
per biweekly pay period (every two weeks).
per semimonthly pay period (twice a month).
per monthly pay period.

REMITTANCE INFORMATION: When remitting payment, provide the pay date/date of withholding and the case identifier. If the employee's/obligor's principal place of employment is Iowa, begin withholding no later than the first pay period occurring 10 days after the date of receipt of this Notice. Send payment within 7 state working days of the pay date/date of withholding. The total withheld amount, including your fee, may not exceed 50% of the employee's/obligor's aggregate disposable weekly earnings. If the employee's/obligor's principal place of employment is not Iowa, for limitations on withholding, applicable time requirements, and any allowable employer fees, follow the laws and procedures of the employee's/obligor's principal place of employment (see #3 and #9, ADDITIONAL INFORMATION TO EMPLOYERS AND OTHER WITHHOLDERS).

Make check payable to: Collection Services Center

Case identifier:

Send check to: Collection Services Center
PO Box 9125
Des Moines, IA 50306-9125

If remitting payment by EFT/EDI, call EPICS at 877-274-2580 and ask for the EFT Coordinator before first submission. Use this FIPS code:_____

Bank routing code:_____ Bank account number:_____.

If this is an Order/Notice to Withhold:

Print Name: Iowa Child Support Recovery Unit

Title of Issuing Official: Iowa Child Support Recovery Unit

Signature and Date: Iowa Child Support Recovery Unit

(Signature of Iowa Child Support Recovery Unit not required by state law)

X IV-D Agency _ Court _ Attorney with authority under state law to
issue order/notice.

If this is a Notice of an Order to Withhold:

Print Name:

Title (if appropriate):

Signature and Date:

_ Attorney _ Individual _ Private Entity

NOTE: Non-IV-D Attorneys, individuals, and non-governmental entities must submit a Notice of an Order to Withhold and include a copy of the income withholding order unless, under a state's law, an attorney in that state may issue an income withholding order. In that case, the attorney may submit an Order/Notice to Withhold and include a copy of the state law authorizing the attorney to issue an income withholding order/notice.

IMPORTANT: The person completing this form is advised that the information on this form may be shared with the obligor.

ADDITIONAL INFORMATION TO EMPLOYERS AND OTHER WITHHOLDERS

() If checked, you are required to provide a copy of this form to your employee/obligor. If your employee works in a state that is different from the state that issued this order, a copy must be provided to your employee/obligor even if the box is not checked.

1. PRIORITY: Withholding under this Order or Notice has priority over any other legal process under state law (or tribal law, if applicable) against the same income. If there are federal tax levies in effect, please notify the contact person listed below. (See 10 below.)
2. COMBINING PAYMENTS: You can combine withheld amounts from more than one employee's/obligor's income in a single payment to each agency/party requesting withholding. You must, however, separately identify the portion of the single payment that is attributable to each employee/obligor.

3. REPORTING THE PAYDATE/DATE OF WITHHOLDING: You must report the paydate/date of withholding when sending the payment. The paydate/date of withholding is the date on which the amount was withheld from the employee's wages. You must comply with the law of the state of employee's/obligor's principal place of employment with respect to the time periods within which you must implement the withholding and forward the support payments.
4. EMPLOYEE/OBLIGOR WITH MULTIPLE SUPPORT WITHHOLDINGS: If there is more than one Order or Notice against this employee/obligor and you are unable to honor all support Orders or Notices due to federal, state, or tribal withholding limits, you must follow the state or tribal law/procedure of the employee's/obligor's principal place of employment. You must honor all Orders or Notices to the greatest extent possible. (See 9 below.)
5. TERMINATION NOTIFICATION: You must promptly notify the Child Support Enforcement (IV-D) Agency and/or the contact person listed below when the employee/obligor no longer works for you. Please provide the information requested and return a complete copy of this Order or Notice to the Child Support Enforcement (IV-D) Agency and/or the contact person listed below. (See 10 below.)
- THE EMPLOYEE/OBLIGOR NO LONGER WORKS FOR:
EMPLOYEE'S/OBLIGOR'S NAME:
DATE OF SEPARATION FROM EMPLOYMENT: _____ CASE IDENTIFIER:
LAST KNOWN HOME ADDRESS: _____
NEW EMPLOYER/ADDRESS: _____
-
6. LUMP SUM PAYMENTS: You may be required to report and withhold from lump sum payments such as bonuses, commissions, or severance pay. If you have any questions about lump sum payments, contact the Child Support Enforcement (IV-D) Agency.
7. LIABILITY: If you have any doubts about the validity of the Order or Notice, contact the agency or person listed below under 10. If you fail to withhold income as the Order or Notice directs, you are liable for both the accumulated amount you should have withheld from the employee's/obligor's income and any other penalties set by state or tribal law/procedure. A withholding order or notice has the same force and effect as any other district court order, including, but not limited to, contempt of court proceedings for noncompliance. Additionally, a payor of income who, with actual knowledge and intent to avoid legal obligation, fails to withhold income or pay the amount withheld, commits a simple misdemeanor for a first offense and a serious misdemeanor for each subsequent offense, and is liable for the costs, interest and reasonable attorney fees related to the collection of the amount due from the payor of income.
8. ANTI-DISCRIMINATION: You are subject to a fine determined under state or tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against any employee/obligor because of a child support withholding. Taking any of these actions means you have committed a simple misdemeanor.

9. WITHHOLDING LIMITS: For state orders, you may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (15 U.S.C. 1673(b)); or 2) the amounts allowed by the state of the employee's/obligor's principal place of employment. The federal limit applies to the aggregate disposable weekly earnings (ADWE). ADWE is the net income left after making mandatory deductions such as: state, federal, local taxes; Social Security taxes; statutory pension contributions, and Medicare taxes. The Federal CCPA limit is 50% of the ADWE for child support and alimony, which is increased by 1) 10% if the employee does not support a second family; and/or 2) 5% if arrears greater than 12 weeks. For tribal orders, you may not withhold more than the amounts allowed under the law of the issuing tribe. For tribal employers who receive a state order, you may not withhold more than the amounts allowed under the law of the state that issued the order.

Additional Information: For lump sum income, withhold the amount listed, or 50% of the payment the employee/obligor will receive, whichever is less. For Iowa withholding limitations, see REMITTANCE INFORMATION.

CHILD(REN)'S NAME(S): DOB:

CHILD(REN)'S NAME(S): DOB:

10. If you have any questions, contact:

Iowa Child Support Recovery Unit
PO BOX 7201
WATERLOO IA 50704-7201
877-274-2580 (PHONE)
319-226-7150 (FAX)
[HTTP://IOWACHILDSUPPORT.GOV](http://IOWACHILDSUPPORT.GOV) (INTERNET)

IF YOUR EMPLOYEE HAS QUESTIONS, TELL YOUR EMPLOYEE TO CONTACT:
SPECIALIZED CUSTOMER SERVICE UNIT AT 515-242-5530 (LOCAL), OR
1-888-229-9223 (TOLL FREE WITHIN UNITED STATES).

IMPORTANT IOWA INFORMATION

You are entitled to deduct a fee of up to \$2.00 to defray the cost of withholding.

The payor of income shall comply with Iowa Chapter 252K when receiving a notice of income withholding from another state. When you receive an income withholding order or notice from another state, see article five of Chapter 252K for specific instructions.

SEND PAYMENTS, WITH THE CASE IDENTIFIER TO:

Collection Services Center, PO Box 9125, Des Moines, IA 50306-9125
or make payments online at iowachildsupport.gov

* If this type of support is court ordered, it is included in current/past due amounts listed. (See page 1).